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UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No. KAN-0110/CIP	
		First Inventor Noriko Kajiki	
		Title METHOD FOR SYSTEM COMPRESSING MOTION IMAGE INFORMATION	
		Express Mail Label No. _____	

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original, and a duplicate for fee processing)

2. ☒ Applicant claims small entity status.
See 37 CFR 1.27.

3. ☒ Specification [Total Pages **52**]
(preferred arrangement set forth below)

- Descriptive title of the invention
- Cross Reference to Related Applications
- Statement Regarding Fed sponsored R & D
- Reference to sequence listing, a table, or a computer program listing appendix
- Background of the Invention
- Brief Summary of the Invention
- Brief Description of the Drawings (if filed)
- Detailed Description
- Claim(s)
- Abstract of the Disclosure

4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets **11**]

5. Oath or Declaration [Total Sheets **3**]

a. ☒ Newly unexecuted (original or copy)

b. ☐ Copy from a prior application (37 CFR 1.63(d))
(for continuation/divisional with Box 18 completed)

i. ☐ **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).

6. ☐ Application Data Sheet. See 37 CFR 1.76

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program *(Appendix)*

8. Nucleotide and/or Amino Acid Sequence Submission *(if applicable, all necessary)*

a. ☐ Computer Readable Form (CRF)

b. Specification Sequence Listing on:

i. ☐ CD-ROM or CD-R (2 copies); or ii. ☐ Paper

c. ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATIONS PARTS

9. ☐ Assignment Papers (cover sheet & document(s))

10. ☐ 37 CFR 3.73(b) Statement ☐ Power of Attorney
(when there is an assignee)

11. ☐ English Translation Document *(if applicable)*

12. ☒ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations

13. ☐ Preliminary Amendment

14. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)

15. ☐ Certified Copy of Priority Document(s)
(if foreign priority is claimed)

16. ☐ Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i).
Applicant must attach form PTO/SB/35 or its equivalent.

17. ☐ Other: _____

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:

☒ Continuation ☐ Divisional ☒ Continuation-in-part (CIP) of prior application Nos.: **09/750,118 and PCT/JP02/00713**

Prior application information: Examiner _____ Art Unit: **2621**

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number or Bar Code Label	23353	or <input checked="" type="checkbox"/> Correspondence address below
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City Washington	State DC	Zip Code 20036	
Country US	Telephone (202) 955-3750	Fax (202) 955-3751	

Name (Print/Type) Robert S. Green	Registration No. (Attorney/Agent) 41,800
Signature	Date July 25, 2003

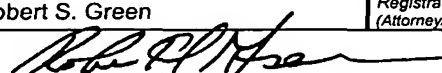
08306 U.S. PTO
10/02/03

07/25/03

FEE TRANSMITTAL for FY 2003		Complete if Known	
<i>Effective 01/01/2003, Patent fees are subject to annual revision.</i>		Application Number	Not Yet Assigned
		Filing Date	Concurrently Herewith
		First Named Inventor	Noriko Kajiki
		Examiner Name	Not Yet Assigned
		Art Unit	2621
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	KAN-0110/CIP
TOTAL AMOUNT OF PAYMENT (\$) 866.00			

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)																																																																																																																																																																																															
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Deposit Account Number: 18-0013 Deposit Account Name: Rader, Fishman & Grauer PLLC The Director is hereby authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input checked="" type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.		<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - 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***or number previously paid, if greater; For Reissues, see above*

SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Robert S. Green	Registration No. (Attorney/Agent)	41,800
Signature		Telephone	(202) 955-3750
		Date	July 25, 2003